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## FILED Feb 24, 2006 08:00 AM Secretary of State

1. Entity Naπ	MENT # V54117				Secre	tary or State	
Principal Place of Business  7100 FAIRWAY DRIVE  SUITE 34  PALM BEACH GARDENS, FL 33418  Wailing Address  7100 FAIRWAY DR  SUITE 34  PALM BEACH GARDENS, FL 33418				us			
C	O NOT WRITE II	CE	02062006 No Chg-P CRZE034 (11/05)  4. FEI Number Applied For Not Applied For Not Applied For Status Desired S8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent MEI, RONG FENG 4627 BRADY LANE PALM BCH. GARDENS, FL 33418			DO NOT WRITE IN THIS SPACE				
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and title if explicable  (NOTE: Registered Agent signature required when retinatating)  DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00  S. Election Campaign Finan Trust Fund Contribution.				.00 May Be ed to Fees			
TITLE NAME STREET ADDRESS GITY-ST-ZIP	D MEI, RONG ZHAO 4627 BRADY LANE PALM BCH GARDENS, FL	CHS					
TIFLE NAME STREET ADDRESS CITY-ST-ZIP					(90 <mark>00</mark> 0) (9 <b>07/8</b> 0/38)	446399 80011-005 150.00	
NAME SIPLET ADDRESS CITY-ST-ZIP					NOT W		
title name street address city-st-zip				IN '	THIS SF	ACE	
TITLE NAME STREET ADDRESS CITY+ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby of indicated of the cor changed,	pertify that the information supplied with this fi on this report or supplemental report is true a poration or the receiver or trustee exposures or on an attachment with an address, with all	ling does not qualify for the exe and accurate and that my signat to execute this report as reguli other like empowered.	imptions contained ure shall have the s red by Chapter 607	in Chapter 119 same legal effect, Florida Statute	I, Florida Statutes. I of as if made under o es, and that my name	further certify that the information lath; that I am an officer or director appears in Block 10 or Block 11 if	

SIGNATURE AND TYPED DE PAINTED HAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: \_